



Best Practices in Egypt: University Peer Educators



University Peer Educators Reaching School Students

The CATALYST Consortium is a global reproductive health and family planning activity initiated in September 2000 by the Office of Population and Reproductive Health, Bureau for Global Health of the United States Agency for International Development (USAID). The Consortium is a partnership of five organizations: Academy for Educational Development (AED), Centre for Development and Population Activities (CEDPA), Meridian Group International, Inc., Pathfinder International and PROFAMILIA/Colombia. CATALYST works in reproductive health and family planning through synergistic partnerships and state-of-the-art technical leadership. Its overall strategic objective is to increase the use of sustainable, quality reproductive health and family planning services and healthy practices through clinical and nonclinical programs.

Mission

CATALYST's mission is to improve the quality and availability of sustainable reproductive health and family planning services.

The authors' views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

Best Practices in Egypt: University Peer Educators

THE NEED

In Egypt, youth often do not have access to reproductive health and family planning information and services. Many adults, including parents, teachers, and health care providers, believe that it would be wrong to talk to youth about and family planning issues as this could lead to premarital sexual relationships. Because of this discomfort, the health component of Egypt's national education curriculum is rarely taught. This lack of information and open discussion leaves young adults vulnerable to misinformation, confusion, and uninformed decision making just as they are about to begin their reproductive lives. Due to inaccurate information and limited guidance about sexual responsibility many Egyptian adolescents face fear, uncertainty and serious health risks as they approach reproductive age. The "*Knowledge, Attitudes and Practices Study on Reproductive Health Among Adolescents and Youth in the Assiut Governorate*" conducted by National Population Council Institutional Development Project Research Management Unit in collaboration with Faculty of Medicine Community Medicine Department Assiut University in 1998, showed that only 31.8% of youth aged 20-24 were familiar with the term "reproductive health and family planning," and even fewer, only 19.3% of youth aged 15-19 were familiar with this term. Furthermore the study showed that urban youth were more knowledgeable (33.6%) about reproductive health and family planning than their rural counterparts (20.2%). Regarding fertility, the Egyptian Demographic Health Survey 2000 revealed that 58% of unmarried girls/women of reproductive age did not know the period of time when a woman is typically fertile.

THE TAHSEEN SOLUTION

To increase the amount of reproductive health and family planning information that is available to young adults in Egypt, TAHSEEN developed a peer education program at Minia University in February 2004 and scaled it up at the Beni Suef branch of Cairo University in February 2005. This program was the first ever to train and mobilize university students to act as reproductive health and family planning educators for their peers. In so doing, it challenged longstanding norms by training young men and women together. These students have become sources of valuable information among their peers and, by extension, their families and communities. Unlike peer educators in some other countries, these youth provide information and, when necessary, referrals, but they do not perform services or sell commodities, such as condoms.

TAHSEEN trained first- and second-year university students. Two male and two female students from each faculty were nominated based on their volunteer spirit, communication skills, and leadership capacity. These students as well as three university-based supervisors were trained over three days in the following:

1. **Reproductive health and family planning topics**, including family planning, the benefits of delaying a first pregnancy, men's involvement in reproductive health and family planning decision making, and avoiding gender-based violence.
2. **Communication skills**, so youth can talk effectively with peers about sensitive topics, both one-on-one and in groups.

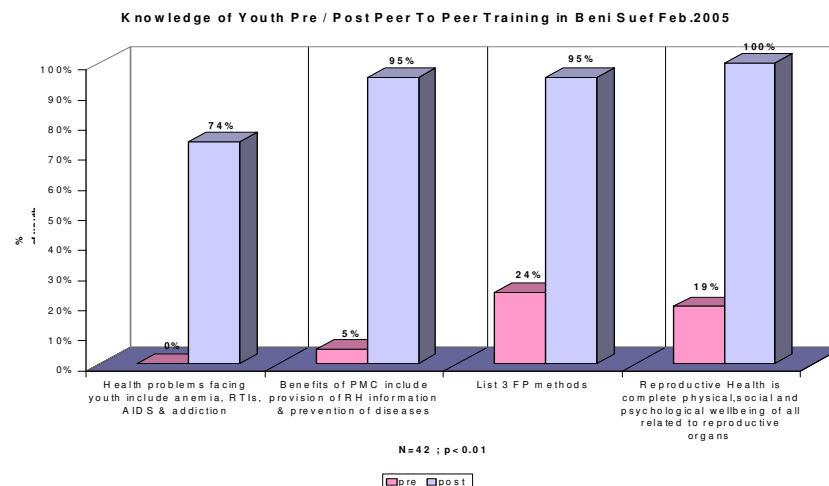
3. **Action planning**, so youth could envision how they might make themselves available for confidential, individual counseling, how they might organize awareness-raising activities, and how they might link peers to reproductive health and family planning services and professional counseling, if necessary.

Local physicians, religious leaders, and university officials were involved in the training. Physicians acquainted peer educators with reproductive anatomy, psychological and physical changes that take place during puberty and contraception. They answered peer educators' questions and dispelled any misconceptions or fears common among youth. Religious leaders provided peer educators with the information and tools to clarify for themselves, and therefore also for their peers, that there was no conflict between Islam and Christianity on birth spacing or family planning use. University administrators participated in order to make clear that peer educators had the full support of their university.

Posttraining, peer educators receive continuous support through bi-weekly meetings with their university-based supervisors. During these meetings, peer educators work together to resolve any problems, clarify issues, and make adjustments to their outreach strategies. At Minia University, when peer educators felt ill equipped to respond to the many questions they were receiving on female genital mutilation, TAHSEEN provided them with additional training.

RESULTS

- **Number of Peer Educators Trained:** As of March 2005, TAHSEEN has trained 21 peer educators in Minia and 42 in Beni Suef. Although there has not yet been an assessment of the number of peer education activities on either campus, the impact of the program is apparent. As the programs have become established on both campuses, peer educators have been increasingly in demand to answer individual students' questions, host education activities at different departments within the university, and participate as youth educators at community activities.
- **Knowledge Increase of Peers:** The knowledge of the peer educators significantly increased as a result of their participation in the program, as illustrated in the following graph.



- **Change in Youth Attitude:** The peer education program has done much more than increase reproductive health and family planning knowledge among youth. It has created opportunities for youth to take responsibility for themselves and for others, and, with the blessing of the medical, university, and religious communities; it has begun breaking down taboos to open dialogue about reproductive health and family planning issues, both between generations and between men and women.

Before becoming a peer educator, 17 year old Marwa Mukhtar thought menstrual blood was “rotten,” pain medication to fight cramps caused infertility, and had never heard of a condom. As a peer educator she received accurate information about many aspects of reproductive health and family planning of interest to youth. Now she shares her newfound knowledge about reproductive health and family planning with her friends, sisters, cousins and even her mother. In fact, she would like to be a reproductive health and family planning educator when she grows up. According to Marwa, “Ninety-five percent of our information was wrong. Because of our customs and traditions we were embarrassed to talk, but I have learned to surmount the shyness. Now I know that these are not things that contradict our religion... TAHSEEN will deliver a message through the generations.”

Mohamed Mostafa, a male peer educator stated that before joining the program he assumed reproductive health and family planning was only a subject of interest for girls and women. He didn't know about its importance for men. Now he realizes that he has a role to play as a man with regard to informed decision making about RH/FP issues. Mohamed says, “I don't need a structured occasion to share this information with my friends. Even while we take a stroll alongside the Nile this summer, I shall share my newfound knowledge with others.”

One young co-ed at Minia University had the utmost trust in one of the peer educators as she shared her suspicion that she was pregnant. Married in a secret ceremony (orfi), the girl's marriage, and possible pregnancy, would have been unforgivable, bringing great shame to her family and herself. With great tact, the peer educator accompanied the girl to the physician, providing her with support and accurate information and enabling her to avoid risky behavior in the future.

- **Program Expansion:** After just one year the Minia University peer educator program is expanding with little involvement from TAHSEEN. Peer educators continue to propose new ways to serve their students. A plan was recently developed to display a question box in a prominent spot so that students who are embarrassed to approach peer educators directly can ask questions anonymously by writing them on a slip of paper. Peer educators answer these questions by posting their responses in a public place where all students can read them. Peer educators in Beni Suef are developing plans to host community awareness-raising activities in each faculty within the university. Over the long summer holiday peer educators also joined governorate youth committees in conducting Shabab TAHSEEN Week activities for rural village youth.

LESSONS LEARNED

Within the Egyptian cultural context, youth RH/FP issues must be approached with great sensitivity, especially within the conservative environment of the educational system. TAHSEEN conducted the first peer educator orientation and training activity at Minia University in conjunction with the university's youth care department, and with the full support of the head of the university. Nonetheless some students and one key staff member expressed grave doubts about addressing RH/FP topics in mixed male/female groups. This resulted in the questioning of the Project's motives by top university officials. TAHSEEN held several additional orientation meetings with staff and students, providing further explanation of the peer educator program goals and objectives. Today, the program has the full and active support of the university. Key lessons should be kept in mind when creating a peer educator program:

- Adapt and customize international models to fit the local environment and allow the students to be instrumental in the process. This will enable key opinion shapers, decision makers and gatekeepers to overcome their doubts.
- University staff may be more motivated to support peer educator programs when presented within a larger context that enables them to share their experience with other universities.
- Garner support from departments within the university that are youth-oriented, but include key players that can help to minimize problems and contribute to the sustainability of the program, even if it slows progress.
- Link peer educator programs to local youth committees and community-level activities to capitalize on their enthusiasm and commitment.
- Make use of religious leaders trained in RH/FP as an effective means of providing answers that are in harmony with religious doctrine or practices, especially in traditionally conservative societies.

